PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

108312-0304796

CLAIMS AS FILED - PART I (Column 1)						(Column 2)		SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			14				1	RATE	FEE		RATE	FEE
FOR NUMBER FILE				ILED	NUMBI	ER EXTRA		BASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS / minus 2				us 20=	* Ø)		X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS 3 =				* Ø	^		X42=		OR	X84=		
MULTIPLE DEPENDENT CLAIM PRESENT								+140=			+280=	
* If the difference in column 1 is less than zero, enter					"0" in c	olumn 2		TOTAL		OR OR	TOTAL	750
CLAIMS AS AMENDED - PAR					T II			TOTAL		I O N	OTHER	
		(Column 1)	(Column 2) (Column 3)				SMALL	NTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT C						,	+140=		OR	+280=	
	1510							TOTAL			TOTAL	
ADDIT. FE (Column 1) (Column 2) (Column 3)											ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	 	=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	
<u> </u>		NTATION OF MI	CLAIM		ا ا	+140=		OR	+280=			
L.								TOTAL			TOTAL	
(Column 1) (Column 2) (C							. ,	ADDIT. FEE			ADDIT. FEE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84≈	
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT						1	+140=			+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												
***	If the "Highest Nu	mber Previously Pa mber Previously Pa ober Previously Pa	aid For" IN TH	S SPACE	is less tha	ın 3, enter "3."	′	ADDIT. FEE	propriate box		ADDIT. FEE	

PTO/SB/06 (08-00)

Approved for use through 10/31/2002. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE o a collection of information unless it displays a valid OMB control number. Under the Paperwork Reduction Act of 1995, no persons are required to respond to Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD OTHER THAN CLAIMS AS FILED-PART I **SMALLENTITY** OR SMALLENTITY (Column 2) (Column 1) NUMBEREXTRA FOR **NUMBER FILED RATE RATE** FEE **BASIC FEE** s 750 OR (37 CFR 1.16(a)) TOTALCLAIMS minus 20 = OR 18 INDEPENDENT CLAIMS minus 3 = 0 OR 0 (37 CFR 1.16(b)) MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) OR 750 TOTAL OR TOTAL * If the difference in column 1 is less then zero, enter "0" in column 2 CLAIMS AS AMENDED - PARTII **OTHER THAN SMALLENTITY** OR **SMALLENTITY** (Column 1) (Column 2) (Column 3) **CLAIMS** HIGHEST ADDI-ADDI-REMAINING NUMBER **PRESENT RATE** TIONAL TIONAL **RATE AMENDMENT AFTER PREVIOUSLY EXTRA FEE** FEE AMENDMENT PAID FOR OR Total Minus (37 CFR 1.16(c)) OR Independent Minus (37 CFR 1.16(b)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL ADDIT.FEE TOTAL OR ADDIT. FEE (column 1) (Column 3) (Column 2) CLAIMS **HIGHEST** ADDI-ADDI-PRESENT REMAINING NUMBER **RATE** TIONAL **RATE** TIONAL AMENDMENT **AFTER PREVIOUSLY EXTRA** FEE FEE AMENDMENT PAID FOR OR Total (37 CFR 1.16(c)) = Minus OR *** Independent Minus (37 CFR 1.16(b)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL OR ADDIT. FEE ADDIT, FEE (column 1) (Column 2) (Column 3) **CLAIMS** HIGHEST ADDI-ADDI-REMAINING NUMBER **PRESENT RATE** TIONAL TIONAL RATE **AMENDMENT AFTER PREVIOUSLY EXTRA** FEE FEE AMENDMENT PAID FOR OR Total (37 CFR 1.16(c)) Minus OR Independent Minus (37 CFR 1.16(b)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM OR TOTAL TOTAL OR * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ADDIT. FEE ADDIT. FEE ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.